KINNIC LONG TERM CARE

1663	Ε	DIVISION	ST

RIVER FALLS 54022 Phone: (715) 426-600	0	Ownership:	Limited Liability Company
Operated from 1/1 To 12/31 Days of Operation	: 366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	68	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	68	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	66	Average Daily Census:	65

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	.2/31/04)	Length of Stay (12/31/04)	%
Home Health Care	No	Primary Diagnosis	~~~~~ 왕	Age Groups	%	 Less Than 1 Year	30.3
Supp. Home Care-Personal Care	No					1 - 4 Years	47.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	9.1	More Than 4 Years	22.7
Day Services	No	Mental Illness (Org./Psy)	31.8	65 - 74	6.1		
Respite Care	No	Mental Illness (Other)	10.6	75 - 84	24.2		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.5	********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	15.2	Full-Time Equivalent	
Congregate Meals	No	Cancer	1.5			Nursing Staff per 100 Res	idents
Home Delivered Meals	Yes	Fractures	0.0	İ	100.0	(12/31/04)	
Other Meals	No	Cardiovascular	12.1	65 & Over	90.9		
Transportation	No	Cerebrovascular	12.1			RNs	9.5
Referral Service	No	Diabetes	7.6	Gender	용	LPNs	9.4
Other Services	No	Respiratory	1.5			Nursing Assistants,	
Provide Day Programming for	ĺ	Other Medical Conditions	22.7	Male	22.7	Aides, & Orderlies	41.6
Mentally Ill	No			Female	77.3		
Provide Day Programming for	ĺ		100.0	İ			
Developmentally Disabled	No				100.0		

Method of Reimbursement

		Medicare 'itle 18			Medicaid 'itle 19			Other			Private Pay	2		amily Care			anaged Care	<u>l</u>		
Level of Care	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	2	4.2	153	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.0
Skilled Care	4	100.0	374	44	91.7	130	0	0.0	0	14	100.0	146	0	0.0	0	0	0.0	0	62	93.9
Intermediate				2	4.2	108	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		48	100.0		0	0.0		14	100.0		0	0.0		0	0.0		66	100.0

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12,	/31/04
Deaths During Reporting Period		 		Total			
Percent Admissions from:		Activities of	%		% Needing sistance of	% Totally	Number of
Private Home/No Home Health	9.5	Daily Living (ADL)	Independent	One	or Two Staff	Dependent	Residents
Private Home/With Home Health	3.2	Bathing	0.0		69.7	30.3	66
Other Nursing Homes	6.3	Dressing	4.5		74.2	21.2	66
Acute Care Hospitals	79.4	Transferring	25.8		66.7	7.6	66
Psych. HospMR/DD Facilities	0.0	Toilet Use	24.2		60.6	15.2	66
Rehabilitation Hospitals	0.0	Eating	54.5		33.3	12.1	66
Other Locations	1.6	*******	******	*****	******	******	*****
Total Number of Admissions	63	Continence		%	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	al Catheter	9.1	Receiving Resp	iratory Care	12.1
Private Home/No Home Health	33.8	Occ/Freq. Incontiner		62.1	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	10.8	Occ/Freq. Incontiner	nt of Bowel	37.9	Receiving Suct	ioning	0.0
Other Nursing Homes	4.6	į			Receiving Osto	my Care	3.0
Acute Care Hospitals	3.1	Mobility			Receiving Tube	Feeding	1.5
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	1.5		anically Altered Diets	25.8
Rehabilitation Hospitals	0.0	į -				-	
Other Locations	3.1	Skin Care			Other Resident C	haracteristics	
Deaths	44.6	With Pressure Sores		3.0	Have Advance D	irectives	90.9
Total Number of Discharges		With Rashes		3.0	Medications		
(Including Deaths)	65	İ			Receiving Psyc	hoactive Drugs	68.2

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		Own	ership:		Size:		ensure:				
	This	Proj	prietary	50	-99	Ski	lled	Al	1		
	Facility	Facility Peer Group			Group	Peer	Group	Facilities			
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	95.6	88.5	1.08	89.0	1.07	90.5	1.06	88.8	1.08		
Current Residents from In-County	47.0	80.0	0.59	81.8	0.57	82.4	0.57	77.4	0.61		
Admissions from In-County, Still Residing	17.5	17.8	0.98	19.0	0.92	20.0	0.87	19.4	0.90		
Admissions/Average Daily Census	96.9	184.7	0.52	161.4	0.60	156.2	0.62	146.5	0.66		
Discharges/Average Daily Census	100.0	188.6	0.53	163.4	0.61	158.4	0.63	148.0	0.68		
Discharges To Private Residence/Average Daily Census	44.6	86.2	0.52	78.6	0.57	72.4	0.62	66.9	0.67		
Residents Receiving Skilled Care	97.0	95.3	1.02	95.5	1.02	94.7	1.02	89.9	1.08		
Residents Aged 65 and Older	90.9	92.4	0.98	93.7	0.97	91.8	0.99	87.9	1.03		
Title 19 (Medicaid) Funded Residents	72.7	62.9	1.16	60.6	1.20	62.7	1.16	66.1	1.10		
Private Pay Funded Residents	21.2	20.3	1.05	26.1	0.81	23.3	0.91	20.6	1.03		
Developmentally Disabled Residents	0.0	0.9	0.00	1.0	0.00	1.1	0.00	6.0	0.00		
Mentally Ill Residents	42.4	31.7	1.34	34.4	1.23	37.3	1.14	33.6	1.26		
General Medical Service Residents	22.7	21.2	1.07	22.5	1.01	20.4	1.11	21.1	1.08		
Impaired ADL (Mean)	47.9	48.6	0.98	48.3	0.99	48.8	0.98	49.4	0.97		
Psychological Problems	68.2	56.4	1.21	60.5	1.13	59.4	1.15	57.7	1.18		
Nursing Care Required (Mean)	6.1	6.7	0.91	6.8	0.89	6.9	0.88	7.4	0.82		